

PHYSICAL EXAMINATION OF IMMIGRANTS

HEARINGS

BEFORE

THE COMMITTEE ON IMMIGRATION AND NATURALIZATION

HOUSE OF REPRESENTATIVES

SIXTY-SIXTH CONGRESS

THIRD SESSION

JANUARY 11, 1921

STATEMENTS OF

DR. JOSEPH BROADMAN

DR. R. H. CREEL



**WASHINGTON
GOVERNMENT PRINTING OFFICE
1921**

COMMITTEE ON IMMIGRATION AND NATURALIZATION.

HOUSE OF REPRESENTATIVES.

SIXTY-SIXTH CONGRESS.

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PHYSICAL EXAMINATION OF IMMIGRANTS.

HOUSE OF REPRESENTATIVES,
COMMITTEE ON IMMIGRATION,
Tuesday, January 11, 1921.

The committee this day met at 2 o'clock p. m., Hon. Albert Johnston (chairman), presiding.

The CHAIRMAN. Gentlemen, a few days ago I received a letter from the publishers of the Modern Health Advocate, signed by Joseph Broadman, editor. Dr. Broadman is of 15 Park Row, New York City. The letter is as follows. The letter is on the stationery of the Modern Health Society, 15 Park Row, New York City, publishers of The Modern Health Advocate. It is dated January 3, 1921, and the letter is:

The editorial and personal observations by Dr. Joseph Broadman in the inclosed Modern Health Advocate have been marked for your special attention.

The purpose is to focus public attention upon the lack of precaution taken at Ellis Island to prevent the constant and ever-increasing influx of venereal disease into this country.

We feel that you will gladly join us to bring sufficient pressure to bear on the authorities so that they will take the necessary measures to wipe out the venereal disease menace through Ellis Island.

May we count on your help in this work?

Respectfully, yours,

THE MODERN HEALTH ADVOCATE,
JOSEPH BROADMAN, *Editor.*

Dr. Broadman is prepared to make a statement to the committee. Doctor, will you give the committee your name and residence?

STATEMENT OF DR. JOSEPH BROADMAN, NEW-YORK CITY.

Dr. BROADMAN. Joseph Broadman, 15 Park Row, New York City.

The CHAIRMAN. I might say that the members of this committee as well as other Members of the House of Representatives received a letter about January 3 similar to the one which I have received and along with that letter a copy of the pamphlet, the Modern Health Advocate, a copy of which is now before the committee. Dr. Broadman is editor of this pamphlet, the Modern Health Advocate, issued by the Modern Health Society, of 15 Park Row, New York City, and in this pamphlet Dr. Broadman gives the results of his personal investigation of the conditions at Ellis Island. Upon the suggestion of Representative Raker the committee acted promptly upon the suggestion of Dr. Broadman and asked that he be good enough to come down here and make his statement in full. He is here in response to our invitation and I think it would be well to have him proceed in his own way for awhile without interruption.

Dr. BROADMAN. It affords me great pleasure to thank you for the promptness with which you have taken up this particular phase of

the immigration question. Within two days after my report appeared in the *Modern Health Advocate* you had already considered the matter and requested my appearance before you.

The country, and those especially interested in the question, will be satisfied to know that your committee is so extremely watchful in seeing that "what is right shall be done."

Personally I express to you my deepest appreciation for the opportunity of giving my own version of this important problem. To Mr. Raker, of California, a member of your honorable committee, I am deeply indebted for bringing this matter before you and for keeping in constant touch with me.

It occurred to me—as a citizen—that Ellis Island could be a great and constant avenue through which venereal diseases may be continually imported into this country, unless such an influx were prevented by proper measures.

Millions of dollars are being spent annually by national, city, and state organizations to eradicate those diseases, and their far-reaching effects, among the population already resident here. I confidently expected that Ellis Island, where a complete control and elimination can be exercised, would not tolerate new additions to our already too high prevalence rate, by allowing immigrants, who are diseased, to enter.

With these principles in mind, being a physician especially interested in venereal diseases, I undertook a personal investigation, and on the afternoon of December 8, 1920, made a trip there which resulted in the following findings:

First, no precautions of value are taken to prevent those suffering from venereal diseases from entering the country.

Second, if an immigrant's external appearance, as he walks by the immigration examiner, does not disclose any evidence of venereal disease, that ends the medical precautions.

Third, since only in the rarest instances would such a glimpse at a person be of any value in the detection of those diseases, such an inspection is little more than useless.

Fourth, if an immigrant is suspected of illness, no matter what its nature, and in the course of examination a venereal disease is discovered, he is held for deportation.

Fifth, whereas considered serious enough to warrant deportation when discovered accidentally, nothing effective is being done, as a routine procedure, to disclose those diseases wherever they exist.

The problem of eradicating venereal diseases or of diminishing their prevalence is dovetailed with the prevention of additional infection carriers from getting into this country.

Even the smallest number of additional venereal-disease cases reaching here adds a tremendous burden to the community in caring for them and further endangers our own health, when this number is added to the already very high percentage of diseased.

To keep such diseases out of the country a great part of the precautionary work could and should be done abroad. The steamship companies should be required to examine thoroughly each immigrant before boarding their steamers, for venereal diseases. Fines for non-observance of this law or incompetent examinations should be imposed and high enough so that their own interests will be best served by proper and efficient methods of physical examination.

Steamship companies should be required to issue written warnings to every purchaser of a steamship ticket, at the time of purchase, that if applicants for passage be afflicted with venereal disease they will not be permitted to sail nor would they be admitted in our ports. They should also be warned by these companies that upon arrival in this country another and very rigid examination faces them, which will surely cause deportation if a venereal disease is discovered.

Such warnings will have the effect of deterring a good many venereally afflicted people from even attempting a journey to this country before being cured on the other side.

As is well known, a great many people celebrate their departure at the port of sailing from Europe and a great many new infections are thus contracted. These new infections the steamship company's physicians could not yet detect, but they should be searched for here, together with such other cases as have been overlooked abroad.

There should be stringent laws compelling the complete physical examination of every immigrant by the various steamship companies in Europe, and this would probably cause those companies to adopt methods of their own which will discourage immigrants from leaving their own homes before ascertaining whether or not they are afflicted.

However, in order to convince that not relaxation in the observance of those laws abroad will be tolerated we must be vigilant in our own ports, so that certain detection will follow slackness in enforcing those laws on the other side.

Not only will such alertness secure respect for the law, but it will certainly act as the best known preventative against many infections by enforcing continence, which is the best and only positive venereal disease preventative known to medical science.

For these purposes a well organized and capable staff of male and female physicians and nurses who are specially trained in the detection of venereal diseases should be established in our own ports. The foundation can be such as to make an increase and decrease of personnel possible without the loss of efficiency. The more efficient at first, the sooner will it be possible to reduce the size of the staff and systematize the work.

For the purpose of economy a combination staff could be organized by adding to the present one, physicians specially trained in venereal diseases. If the venereal-disease branch will have a competent director, he can always see to it that either with a separate or combination staff, this department will have the proper efficiency.

To determine approximately how many physicians and nurses are needed at Ellis Island will require a study of the facilities there. Without such study only a guess could be made.

The number should be ample so that every immigrant will be properly examined. Of course, by the process of exclusion and elimination a large number can be quickly passed and only those suspected of being diseased will receive the physician's special attention. This, however, belongs in the sphere of details which can be taken care of by the director of the division.

Certain it is that the inauguration of such methods will have the following effects:

First, it will cause work to be done abroad which rightly should be done abroad.

Second, prospective immigrants will be educated up to the fact that they can not come here with venereal diseases.

Third, the laws regulating the problem will be effective.

Fourth, the venereal diseases will be kept out of the country.

Fifth, the expense involved is only a small fraction of the financial cost to the community and the damage wrought, without such laws being in force, and it affords an insurance against any virulent spread of venereal diseases from this source.

Now, gentlemen, I will give you a few statistics:

Gonorrhea in Europe—

Osler claims 30-40 per cent congenital blindness, 50 per cent of sterility among women, 25 per cent of major operations, are due to gonorrhea.

Osler—British Army had in April, 1917, 71,000 cases of gonorrhea, 21,000 cases of syphilis, 6,000 cases of chancroid.

Gaucher—France: In Paris syphilis more than doubled in the first two years of war.

M. Thibierge—France: During 1916 the French Army had a total of 63,000 cases of venereal diseases as follows: 70 per cent gonorrhea, 21 per cent syphilis, 9 per cent chancroid; claims army to have 50,000 to 60,000 cases of syphilis annually with a total of about 200,000 cases for three years.

Gonorrhea in adult males in the United States—

Morrow and Forcheimer claim it to be 50-60 per cent as follows: 20 per cent before 21st year, more than 60 per cent before 25th year, and more than 80 per cent before 30th year.

It is shown by recent Army figures to be four to five times more prevalent than syphilis.

Among females: 15 times more prevalent in men than in women, 50 per cent of absolute and one-child sterility is due to gonorrhea in women. It varies with the social status, etc., and ranges from 4 to 18 per cent. Pregnant women in continental hospitals, 20-25 per cent. Prostitutes, 80-100 per cent. It is next to measles in frequency.

Syphilis in adults in London and Paris—

Fourier—10-13 per cent.

Collie—Among British workingmen in seemingly good health, 9 per cent. In the United States: Vedder—20 per cent among young men enlisting in Army. Those applying for commissions and training at West Point, 2-5 per cent. Hospital patients show about 10-20 per cent; among young women, 3-20 per cent; and depends on age, marital condition, social status, etc. Private patients, 10-20 per cent; children, 3-20 per cent; negroes in apparently good health, 25-20 per cent; negroes sick show 40-50 per cent; criminals, 20-40 per cent; insane (male whites), 20-35 per cent; prostitutes, 50-100 per cent.

These figures carry an unmistakable message to every intelligent man and woman. Syphilis and gonorrhea are among the most widespread of all infectious diseases. Their victims are numbered in many millions, not in hundreds. Not a man or woman lives who does not touch elbows with them daily; whose house has not seen their entry and departure and who may not at any time themselves become afflicted.

While there are variations in the degree of risk, no one can sit by and say in smug unconcern, "This is not my affair."

Mr. RAKER. What is the nature of the work you are doing in New York?

Dr. BROADMAN. Beginning next Saturday I will devote two hours of my time and of my assistants' time daily in treating patients without charge. When I first thought of the idea I intended to make a nominal charge, but have decided to make no charge whatever. Such patients as are referred to us by charitable and philanthropic organizations are to have the preference.

Mr. RAKER. Suppose this law is enacted providing for additional medical examiners at Ellis Island, would you be inclined to accept any position in connection with the work?

Dr. BROADMAN. I would absolutely refuse to accept any position at a salary, but if my services are needed, I shall be glad to help in an advisory capacity without making any charge.

Mr. RAKER. I notice you refer in your statistics to children being afflicted with venereal diseases in the United States from 3 to 10 per cent. How do children get venereal diseases?

Dr. BROADMAN. From their parents. The parents, either one or both, having a venereal disease transmit this disease to their children and sometimes a well-meaning neighbor will drop in to pay a social visit and kiss the baby, and if that neighbor has syphilis it is very easily transmitted to the child.

Mr. RAKER. Suppose one of the waiters in the restaurant here has gonorrhea or syphilis and goes to the toilet and returns. Then he handles a spoon and sugar—you can't keep him from it—and picks up the spoon and sugar and gives it to one of us. Suppose he has gonorrhea or syphilis, is there any danger of his transmitting that disease to a customer of the restaurant here?

Dr. BROADMAN. That question very often arises, but it is impossible to state whether or not a man who has touched spoons and other utensils which are used at the table would be likely to transmit the disease to one of the diners of the restaurant. It is probable that if the spoon is wet the germ would remain and if that spoon is then placed to the mouth it is likely that another might become infected with the disease.

Mr. RAKER. Doctor, in your opinion is it at all likely that this disease could be transmitted from one person to another without personal contact?

Dr. BROADMAN. If a waiter should transplant some of the germs on a fork or spoon or bread or sugar that he handles, if the fork or spoon should happen to be dry the germ would not survive. If the fork or spoon should be wet then the germ would live longer and in conveying the fork or spoon to one's mouth it is altogether probable that the disease could be transmitted. Or, if the waiter gives you a glass it is transmitted very easily because of water being present. If he gives you a glass that is cracked and you put that glass to your mouth it is likely to be transmitted to you.

Mr. RAKER. Can it be transmitted that way?

Dr. BROADMAN. Yes.

Mr. RAKER. How about clothing?

Dr. BROADMAN. It certainly can be transmitted through clothing, but clothes are generally dry. If, however, the clothing is wet and

the germ is translated on the clothing it may live for a while and if another person puts that clothing close to certain parts it is altogether probable that the disease could be transmitted.

Mr. RAKER. Suppose a man has a venereal disease and goes into the toilet and comes out and uses the same towel that other people use; is there any danger of transmitting this disease to other people?

Dr. BROADMAN. Yes, sir; if you put that towel near your mouth you are likely to get it.

Mr. RAKER. Has that been demonstrated?

Dr. BROADMAN. Yes, sir.

Mr. RAKER. Then the statement that a man can contract venereal disease in a toilet is absolutely true?

Dr. BROADMAN. Yes, sir; but that does not happen frequently enough.

Mr. RAKER. I wanted to know whether or not medically it could happen.

Dr. BROADMAN. Yes, sir; sometimes one goes to a toilet and while he is on the toilet the water will splurge up and if a man who preceded you on that toilet had gonorrhea or syphilis and deposited some of those germs in the toilet, on coming in contact with certain parts of the body the germ could be transmitted. Naturally the germs while in the water would become diluted. But if the water should splurge up and touch your genital organs you would be liable to contract the disease.

Mr. RAKER. What effect does it have upon the children when either parent, the mother or the father, has syphilis?

Dr. BROADMAN. The great number of children born of syphilitic parents die before they reach five years of age. If they survive five years, whether because of treatment or surrounding habits or circumstances, they are more likely to get over it.

Mr. RAKER. I was at Ellis Island some time ago and saw how the immigrants come in there and it seems to me it was just a matter of looking at them and passing them on, men and women alike, without being medically examined to detect whether or not they had a venereal disease. Can you tell us what facilities they have there for detecting this disease in immigrants?

Dr. BROADMAN. Practically none. The examinations which are made now are for the purpose of detecting mental diseases or if a person has tuberculosis it can be detected by looking at him. But venereal disease in a man or woman can be detected only by looking at the parts where it occurs.

Mr. RAKER. A man or woman might come along and look all right yet have a venereal disease, either gonorrhea or syphilis?

Dr. BROADMAN. Prof. Cooley, of London, England, examined a certain number of workmen in apparently good health. They seemed to have nothing the matter with them, yet upon physical examination it was discovered that 9 per cent of them had syphilis.

Mr. RAKER. Doctor, is it your view that in this work of examining immigrants at Ellis Island, lady physicians should be employed to assist in detecting this disease?

Dr. BROADMAN. Yes, sir.

Mr. KNUTSON. How many have they at Ellis Island capable of making physical examinations?

Dr. BROADMAN. I am not informed as to that.

Mr. RAKER. Is it your opinion if proper medical examinations are made as you have designated in your statement by competent physicians, men and women, that 90 per cent of immigrants afflicted with venereal disease would be eliminated?

Dr. BROADMAN. Yes, sir; over 90 per cent.

Mr. RAKER. At present there is a perfect stream of immigrants coming into this country?

Dr. BROADMAN. Yes, sir.

Mr. WELTY. The Government has made provision for detecting venereal diseases in immigrants?

Dr. BROADMAN. Not for venereal diseases.

Mr. RAKER. When you were at Ellis Island did you go on board ship to examine the situation there?

Dr. BROADMAN. No, sir: I have discussed the question with the medical officer in charge and my report is based upon what he told me.

Mr. RAKER. What did he tell you he was doing with regard to making examinations in order to detect venereal disease?

Dr. BROADMAN. Simply what I have expressed in my report. They pass by examiners and if the appearance of an immigrant is all right, that is, if he has no external evidences of disease he is passed on. Some of the examinations are conducted on board ship but most of it is done at Ellis Island.

The CHAIRMAN. Do you know whether or not any steamship companies make any kind of an examination at the port of embarkation?

Dr. BROADMAN. I am not prepared to say about that, but I don't think they do.

Mr. WILSON. If the steamship companies don't make an examination, then there are no examinations made by the Government at the port from which these immigrants come?

Dr. BROADMAN. You may take it for granted that no examinations are made for venereal diseases anyway.

The CHAIRMAN. If a man develops a disease on the way the ship's doctor is required to report that on the ship's manifest, is he not?

Dr. BROADMAN. I am not prepared to say about that.

Mr. KNUTSON. What per cent of venereal diseases through an examination such as is conducted at Ellis Island could be detected? That is, by lining the men up and looking at them as they pass by; as they go down the line what per cent would show venereal disease in their face?

Dr. BROADMAN. An infinitesimal part of them.

Mr. KNUTSON. One or two per cent?

Dr. BROADMAN. Even less than that. There are only certain stages in which the venereal rash shows on the face, and the only possible way you could detect whether or not a man or woman had a venereal disease would be for this rash to make its appearance on their faces on the day on which they are lined up at Ellis Island and passed on to shore.

Mr. BOX. At what stage does this facial rash appear?

Dr. BROADMAN. In the second stage.

Mr. KNUTSON. Can you discover that from an examination of the face?

Dr. BROADMAN. No, sir. That examination is practically useless unless rash is present.

Mr. RAKER. From your statement and from what the committee knows of its own personal knowledge as to conditions there, what remedy would you suggest?

Dr. BROADMAN. The establishment of a staff of competent physicians and nurses who would work out a system and prepare to make proper physical examinations. If this is done I believe that 90 per cent or more of venereal disease inflicted patients can be kept out of this country.

Mr. KNUTSON. What per cent of insanity cases can be traced to venereal disease?

Dr. BROADMAN. A good per cent can be traced to syphilis. We can not tell in every instance whether syphilis is the cause of insanity, but we know that in 20 to 30 per cent of insanity cases they are afflicted with syphilis.

Mr. RAKER. Are children who inherit syphilis likely to become insane?

Dr. BROADMAN. Yes, sir.

Mr. WHITE. Are these diseases much more prevalent in foreign countries than in America?

Dr. BROADMAN. Yes, sir, since the war.

Mr. WHITE. Is it more prevalent in the poorer classes?

Dr. BROADMAN. Yes, sir, it is found that the better educated people do not have venereal diseases to the same extent that the poorer classes have.

Mr. WHITE. Is the prevalence of these diseases characteristic to any particular country?

Dr. BROADMAN. No, sir. Where people are ignorant it is more apt to be present in the higher degree.

Mr. KNUTSON. Isn't it found more prevalent among the Mediterranean people than among the people of northern Europe?

Dr. BROADMAN. All venereal diseases are more prevalent in those countries.

STATEMENT BY ASST. SURG. GEN. R. H. CREEL, OF THE UNITED STATES PUBLIC HEALTH SERVICE.

The CHAIRMAN. Dr. Creel, you are in charge of the force making examination of immigrants on incoming ships?

Dr. CREEL. My division includes the supervision of the medical examination of aliens.

The CHAIRMAN. State to the committee the method of making medical examinations of immigrants coming into the United States through Ellis Island?

Dr. CREEL. Medical examination of immigrants and alien seamen is by law imposed upon the United States Public Health Service. In conformity with that law medical officers are detailed to various stations for making examinations of aliens. The Surgeon General is charged with drafting regulations governing the medical examination of aliens so as to determine what diseases come within the meaning of that part of the law relating to "dangerous contagious or loathsome contagious diseases." Regulations governing medical examinations of aliens is herewith submitted.

REGULATIONS FILED.

The CHAIRMAN. Is this copy which you now submit the latest regulations which you have on the subject?

Dr. CREEL. Yes, sir; this was prepared in conformity with the act of February, 1917. Touching particularly the work at Ellis Island, I may say there are assigned to that place approximately 40 medical examiners. Medical inspection of aliens has to be done in cooperation with other necessary examinations. The medical examiner does not have to make a thorough examination, and in order to prevent congestion his examination is more or less cursory.

The CHAIRMAN. Why does his examination have to be more or less cursory?

Dr. CREEL. A thorough physical examination of a person, including laboratory test of the body excretions, would take at least one hour's time, and to handle 5,000 emigrants per day (and this is the rate at which they not infrequently arrived before the war) 40 men could not begin to keep up with the examination.

The CHAIRMAN. During the past three months they have been coming in at the rate of 2,000 a day. How many medical examiners would be necessary to make more than a cursory examination of that many immigrants?

Dr. CREEL. To make a complete medical examination requires at least an hour, and there would be certain additional laboratory information required to complete the test including urinalysis, blood tests, sputum examinations. One examiner could not handle more than 20 immigrants a day.

The CHAIRMAN. If a vessel comes in with 1,200 immigrants, that vessel would be tied up, or the immigrants would be tied up for some time if the proper examinations are made with the force that you have stationed at Ellis Island now?

Dr. CREEL. Yes, sir; the facilities at Ellis Island at present are inadequate to provide for such rigid examinations. You would have to have larger space and an additional force.

Mr. RAKER. Suppose 2,000 immigrants are lined up each day, how many medical examiners would be required to make proper examination?

Dr. CREEL. I should say at least 150 examiners.

Mr. WELTY. Don't you make any examination at all for the purpose of detecting venereal diseases?

Dr. CREEL. When I speak of the medical examination as being cursory I by no means desire to imply that it is wholly ineffective. However, it is mainly directed toward detection of the obvious physical defects, such as the lame, the blind, the deaf, or for the purpose of detecting mental defects, and special attention is given to the examination of the eye, skin, and scalp. No special examination is made for the detection of venereal disease. However, I might add that the medical examination at the port of entry and the manner in which it has been performed has certainly proved of value as a deterrent to the embarkation of diseased aliens at foreign ports. Formerly, in 1900 and several years before that date, it was by no means unusual to observe 20 to 50 cases of favus on a ship from the Mediterranean, or 50 to 100 cases of trachoma. During the past 10 or 15 years it

has been a comparatively rare occurrence to observe favus at Ellis Island, and trachoma has been very remarkably diminished among arriving aliens.

Mr. RAKER. I am not a doctor, but I could tell whether a man was lame or blind or deaf, and the only test which I would have to make in order to qualify for an examiner at Ellis Island would be to study up and learn what the symptoms of trachoma are. Doctor, I don't want to seem unfair or to argue the case, but I simply want to impress upon the committee and Members of Congress what we are up against.

Dr. CREEL. All steerage passengers are examined at the Island. We have medical officers go on board the vessel to examine first and second class passengers, but the great majority of immigrants are examined at Ellis Island.

The CHAIRMAN. Just how are those medical examinations made?

Dr. CREEL. As they come up the steps one of our medical examiners examines them for defects of gait, with regard to detecting whether or not they are lame or are afflicted with conditions like locomotor ataxia, peripheral neuritis, or similar nervous trouble. As the line passes on another doctor gives them an examination to determine whether or not they have any disease of the eye or scalp. If an immigrant is suspected of contagious disease or organic defect he is sent to a room where he or she may be disrobed if necessary.

Mr. RAKER. Disrobed if necessary. That applies to only a few cases?

Dr. CREEL. I can not say as to what per cent are disrobed. I was on duty at Ellis Island in 1902 and 1903, when I first came in the service, and again in 1911, and it is my recollection that a large percentage of emigrants were divested of their clothing. In going up the steps they generally carried their baggage with them. If a person had a heart lesion or lung trouble it caused such changes in the facial expression, complexion, and breathing as to attract the attention of the medical examiner. Such suspected persons were then turned aside into a special room for secondary examination.

The CHAIRMAN. Just now they are not permitted to rush them up the steps and rush them down again. It is considered inhuman treatment.

Dr. CREEL. When I was on duty there it was one of the means of detecting heart lesions or lung trouble, and I believe in rushing them up the steps and compelling them to carry their baggage; an examiner could detect most cases of organic disease, unless it be kidney trouble. He could certainly detect most diseases of the lung or heart. That brings us down to the question of venereal disease.

The CHAIRMAN. Where does the examination as to the mental defects come in?

Dr. CREEL. In the first place the ship's surgeon has to render a certificate if he has any knowledge of mentally defective aliens on board, and when the aliens later on pass along the line at Ellis Island they are spoken to by the medical examiner; questions are asked and observations are made as to any peculiarity of demeanor which would suggest mental defectiveness. Idiocy, imbecility, and certain grades of feeble-mindedness cause rather characteristic facial expressions.

Mr. KNUTSON. Do you make any effort to examine immigrants for typhus or lice?

Dr. CREEL. That examination is made at the port of embarkation under the direction of American consulates.

The CHAIRMAN. Is that a recent regulation?

Dr. CREEL. That regulation has been in force for the past six months.

The CHAIRMAN. The Public Health Service man at each consulate examines the immigrants?

Dr. CREEL. Yes, sir; but not primarily for immigration purposes.

The CHAIRMAN. Do the ships' doctors make any examination?

Dr. CREEL. My understanding is that they do. The companies themselves have medical officers for the purpose of making examinations. How rigid they are I could not say. The shipping companies make these examinations for their own protection, because of the penalty providing a fine, I believe it is, of \$200 for bringing in an immigrant who has a contagious disease or mental defect.

Mr. RAKER. At present only first and second class passengers are examined on the ship. Sometimes as many as 1,500 or 2,000 come in and are rushed through the line within an hour. The day we were there it took the doctors all day to give an examination, but I am advised that they do not take more than an hour sometimes.

Dr. CREEL. I can't say what the method at present is. I know that two or three months ago Dr. Kerr took up with the bureau as to whether or not medical examinations should be made on ship. He said that such an examination on ship would be nothing more than a farce because of insufficient lighting facilities and proper space to make the examinations on ship. There might be 1,000 or 1,500 immigrants on board the ship and of that number there would probably be not more than one or two hundred of first and second class passengers. It was proposed that all examinations be made on ship but the chief medical officer protested that they did not have the facilities and space for making the proper examination under such conditions.

Mr. RAKER. What became of that protest?

Dr. CREEL. It was sustained.

Mr. RAKER. For what diseases are immigrants examined at the quarantine station?

Dr. CREEL. Only five; smallpox, typhus, cholera, plague, and yellow fever.

The CHAIRMAN. How about examination for venereal diseases?

Dr. CREEL. Examination for venereal disease is admittedly inadequate. The only way to make a thorough examination for venereal disease is by inspection of the genitalia of men and women and children. It would also be necessary to make blood tests. In regard to syphilis, I am quite sure no medical officer would issue the certificate unless a laboratory test were made, and in order to make proper laboratory tests a fully equipped laboratory and organization would be required.

The CHAIRMAN. Do your annual reports show the discovery of any venereal diseases?

Dr. CREEL. The ships' doctors are required to certify as to whether or not they have any information in regard to immigrants having venereal disease. There is no other disease in which so much secrecy exists as in venereal diseases. In my opinion statistics as to the

prevalence of venereal disease, except in a few instances, are worthless. In the United States there is no law requiring the reporting of venereal disease that is in effective operation. Doctors report very few cases for the reason that infection from venereal disease carries with it a moral stigma.

Mr. RAKER. How about the Army reports?

Dr. CREEL. I am coming to that. You often hear doctors speaking of the prevalence of venereal disease as being 40, 50, and 60 per cent. In order to obtain statistics as to the prevalence of venereal disease among alien seamen, the chief medical officers at Ellis Island and San Francisco were instructed to make an intensive study of a series of sailors on incoming ships, the examination to include visual inspection of the genitalia, with laboratory tests. Amongst 6,153 seamen given a special examination at New York, there were found 189 cases of venereal disease, including gonorrhea, soft chancre, and syphilis, or somewhat less than 3 per cent, and in a similar investigation at San Francisco about 2 per cent of sailors were found to be infected. The individuals examined were not specially selected, but comprised the crews of vessels taken at random.

Mr. KNUTSON. Would not the Army reports establish a pretty fair record for the entire country?

Dr. CREEL. Undoubtedly.

Mr. RAKER. What per cent of venereal diseases are found to be in the Army?

Dr. CREEL. I think the report of draft boards varied in different places. At Philadelphia it was 3.7 per cent. In New York City it was 2.4 per cent. I don't think there was any great disparity. I might say with regard to alien seamen that the percentage of venereal diseases among them is not to be considered as materially different as that obtaining among American seamen.

Mr. KLECZKA. Do you know what per cent existed among our colored soldiers?

Dr. CREEL. No, sir.

The CHAIRMAN. If attempts were made to examine thoroughly all immigrants for these loathsome diseases the same effort would have to be made in regard to alien seamen?

Dr. CREEL. Yes, sir.

The CHAIRMAN. Alien seamen coming ashore are first medically examined before they leave their ship?

Dr. CREEL. The same examination is made of them as is made for immigrants.

Mr. KNUTSON. Don't they have short-arm examination for seamen coming ashore?

Dr. CREEL. I do not think that is universally done.

Mr. RAKER. It would be your opinion that there should be a more rigid medical inspection for immigrants as they come in?

Dr. CREEL. Yes, sir. The medical examination as at present performed is very imperfect.

Mr. RAKER. It would require a personal physical examination of the immigrants in order to detect venereal diseases?

Dr. CREEL. I would say that it would be advisable from a health standpoint, but there are certain commercial aspects of the problem which would also have to be considered.

Mr. RAKER. Should not regard for health be looked after before commercial interests?

Dr. CREEL. In general, yes, sir; but the welfare of the country as a whole would probably be very seriously affected by any material interference with our overseas commerce. With respect to the exclusion of venereal disease, it is not as though we were attempting to exclude plague, cholera, or any of the pestilential diseases which the country is now free from. It has been estimated that there are two or three million cases of venereal disease in the United States, and the best that could be expected by a thorough examination of aliens would be to prevent the addition of some five to ten thousand cases of venereal disease to the already existing two million cases.

Mr. RAKER. If a proper examination were had of all immigrants coming in could not 90 per cent of those having venereal disease be excluded?

Dr. CREEL. Yes, sir.

Mr. RAKER. That would require the expenditure of a little money?

Dr. CREEL. Yes, sir; about \$600,000—if an additional 200 medical examiners were provided—and expenses for doubling or trebling facilities at Ellis Island.

Mr. RAKER. If we are not willing to spend our own money should there not be a sufficient fee required of these immigrants in order to determine whether or not they are afflicted with venereal or other contagious diseases?

Dr. CREEL. Yes sir, but I am just trying to place before the committee the practical results of such an examination.

Mr. KNOTSON. You don't think the present examinations are sufficient to determine whether or not an immigrant is afflicted with a venereal disease?

Dr. CREEL. No, sir.

Mr. KNOTSON. Do you think that such examinations as would determine whether or not an immigrant was afflicted with venereal disease is desirable?

Dr. CREEL. I said it is desirable from a health standpoint.

Mr. KNOTSON. You cannot bring a bull, a mare or a hog into this country without a proper examination by the Agricultural Department.

Dr. CREEL. That is probably true. The chief point I am trying to emphasize it that if we had such medical examinations it will not eliminate venereal disease from the United States or materially decrease its general prevalence.

Mr. WHITE. Doctor, you said 4 per cent of our soldiers had venereal diseases at the time they enlisted?

Dr. CREEL. Yes sir, according to draft board figures.

Mr. WILSON. What per cent of the soldiers were still infected with venereal disease at the time they were discharged from the Army?

Dr. CREEL. I can't say as to that.

Mr. WILSON. For the benefit of the record will you obtain information as to what per cent of our soldiers were afflicted with venereal disease on their first examination for enlistment in the Army and what per cent were still infected at the time they were discharged?

Dr. CREEL. So far as possible I will endeavor to get that information for you. Those statistics will have to be secured from the office of the Surgeon General of the Army.

NOTE.—Figures are not available as to the percentage of venereal disease among men at the time of discharge, but figures are available as to the rate of venereal infection in the Army for the fiscal year 1919. The total strength of the Army for that period was 1,500,047 men, and in that time there were admitted to Army hospitals for venereal disease 92,008 persons, or slightly over 6 per cent of the enlisted personnel. It is understood that it is the general policy of the War Department to effect a cure of venereal cases before men start in the Army. It is probable that the venereal rate among those discharged was comparatively low.

Mr. RAKER. I have been told that about one-tenth of 1 per cent were afflicted with venereal disease at the time they were discharged from the Army. It is stated that if a man contracted venereal disease while in the Army he was court martialed and sent to prison.

The CHAIRMAN. Dr. Creel can you give us the number of cases of venereal disease that have been detected among immigrants coming in at Ellis Island?

Dr. CREEL. Up to June 30 of last year of a total of 1,537,527 immigrants and seamen examined, 3,869 were found to have venereal disease.

Mr. WILSON. That number were detected on the insufficient examination which you have stated we now have?

Dr. CREEL. Yes, sir.

Mr. WILSON. What per cent of cases would you think would be detected if we had proper examination?

Dr. CREEL. That is purely speculative. There is no reason to assume that we could detect more than 3 per cent, that being the prevalence among alien seamen according to our investigation. Eliminating the children, among whom as a class venereal disease is admittedly rare, and most of the married men and women, it is probable that no more than 1 per cent of the emigrants arriving at Ellis Island would be found to be infected with venereal diseases.

Mr. WILSON. What I want to get at is not what the per cent of emigrants coming into this country is who have venereal diseases, but how many who are afflicted with this disease can be detected by passing up the line and going through such examinations as are now given them?

Dr. CREEL. Practically none, or, at least, comparatively few, with the exception of those in the secondary stage of syphilis, who would have characteristic eruption on face and extremities.

Mr. WELTY. How many cases of infections of venereal diseases were detected last year?

Dr. CREEL. 2,047 cases of gonorrhea, 1,158 cases of chancroid, and 664 cases of syphilis out of a total of 1,537,527 of immigrants and alien seamen examined.

The CHAIRMAN. Those cases were brought to the attention of our authorities by ships doctors?

Dr. CREEL. Not all of them, many of them were detected by medical examiners.

Mr. KLECZKA. Those cases include cases in which Wassermann tests were given.

Dr. CREEL. No case of syphilis can be positively certified to without being first given the Wassermann test.

Mr. KLECZKA. You think the Wassermann test is positive in detecting venereal diseases?

Dr. CREEL. It is the most precise test for syphilis that has yet been discovered.

Mr. WILSON. You apply that test only in cases of suspicion from an examination.

Dr. CREEL. Yes, sir.

Mr. WILSON. If an alien is found to have a venereal disease he is subject to deportation?

Dr. CREEL. Yes, sir.

Mr. WELTY. How about those cases you found to be infected with venereal disease? What was done with them?

Dr. CREEL. I can not say as to that; our duty was ended when we certified our findings to the Bureau of Immigration.

Mr. WELTY. You don't know what is done after your report is certified?

Dr. CREEL. No; in some cases they were assigned to a hospital in this country and were allowed to enter after they were cured.

Mr. RAKER. There is no objection to making the physical examination described; nothing stands in the way of making such examinations as would detect over 90 per cent of those who are afflicted with venereal disease except a sufficient number of competent examiners to make a proper examination.

Dr. CREEL. There would have to be increased facilities also at the various ports of entry.

Mr. RAKER. The facilities and the proper number of examiners should not stand in the way of protecting the public health.

Dr. CREEL. That is a matter for the committee to determine whether or not commercial and other interests are involved.

Mr. RAKER. What do you mean by other interests?

Dr. CREEL. Government's interest—item of expense.

Mr. RAKER. Should not our Government be concerned to determine whether or not those who are seeking admission to our shores are afflicted with these loathsome diseases?

Dr. CREEL. If such an intensive examination were adopted by the present limited personnel, with a resulting tying up of shipping in New York Harbor, the whole New York delegation in Congress would expect some immediate remedy from the Secretary of the Treasury or the Surgeon General of the Public Health Service. They would come right down on the head of the Surgeon General.

Mr. RAKER. Let them be on our heads. No ship should be permitted to bring venereal infected immigrants into this country.

Dr. CREEL. From a medical standpoint such an examination would be desirable, but there are other interests, commercial and so forth—to be considered along with the desirability of making such rigid examination.

Mr. RAKER. What do you mean by that?

Dr. CREEL. If such examination would eliminate venereal disease within our States, I would unhesitatingly say that it should be made. By such examinations you would perhaps be able to eliminate 1 per cent of venereal disease from those who are coming in, but it would not eliminate venereal disease in the United States.

The CHAIRMAN. Without regard to these proposed examinations for venereal disease, in your opinion is the medical examination that has been given immigrants at Ellis Island in the past three or four months sufficient for practical purposes?

Dr. CREEL. That is something I can not state very definitely. No doubt that a certain number of diseased aliens are evading detection. On the other hand, I think it is fair to say that the country is not being flooded with such cases. It may be stated that in the year, 1903, when immigration was at high tide, consideration was given to the advisability of requiring that all immigrants be divested of their clothing for the purpose of detecting venereal disease. For various reasons, chief of which was lack of personnel, the practice was not adopted, but in a report relating to the subject the chief medical officer commented on the fact that of 3,427 aliens admitted to the hospital at Ellis Island for various diseases or defects for the fiscal year ending June 30, 1903, only two were found to be suffering with syphilis.

The CHAIRMAN. Was there any report made to your department by the commissioner holding ships in the stream loaded with immigrants awaiting proper examination to determine whether or not they were infected with contagious diseases?

Dr. CREEL. A protest was sent to the surgeon general against examinations on ships, because of the lack of facilities.

The CHAIRMAN. What became of that protest?

Dr. CREEL. It was sustained.

The CHAIRMAN. Do you know anything about the congestion that occurred at Ellis Island around about Christmas time?

Dr. CREEL. I was away from the bureau at that time, on leave of absence.

The CHAIRMAN. If a medical examination at that island should discover that women were not properly cared for or the babies did not have the proper food, would a report of that be made to your department?

Dr. CREEL. I think so.

The CHAIRMAN. To whom would the report be made?

Dr. CREEL. To the local immigration authorities at the island, probably to the matron in charge of the detention rooms.

The CHAIRMAN. Is there any confusion because these examinations are made by one department of the Government?

Dr. CREEL. No, sir; I don't think so.

Mr. RAKER. What State are you from?

Dr. CREEL. From Missouri.

Mr. RAKER. How long have you been in the service?

Dr. CREEL. Eighteen years.

Mr. RAKER. Are you under civil service?

Dr. CREEL. No, sir; I was appointed by the President.

Mr. RAKER. You have been commissioned?

Dr. CREEL. Yes, sir.

Mr. RAKER. How long is your commission for?

Dr. CREEL. For lifetime.

Mr. RAKER. Have you been at Ellis Island recently to determine what the system of examination is there now?

Dr. CREEL. I have not been at Ellis Island for six months.

Mr. RAKER. Let me ask you first how are these doctors appointed?

Dr. CREEL. Some of them belong to the regular commissioned corps of the Public Health Service; others are acting assistant surgeons having a civil-service status. The former are appointed by the President after passing competitive examination, and the latter qualify under the civil-service rules.

Mr. RAKER. What other examinations are made there?

Dr. CREEL. The New York State authorities provide examination for immigrants, but only with respect to the detection of quarantinable diseases.

Mr. RAKER. If your medical examiners at Ellis Island, 40 in number, are of the same opinion as you are, they would not be particular in detecting venereal disease among immigrants, because if the immigrants were not permitted to come ashore it would interfere with business and commercial interests.

Dr. CREEL. I have not in any way intended to imply that the medical officers are unreasonably concerned in their examinations as to the effect their methods may have on business interests, or that they give commercial interests any preference. What I have sought to make plain was this (and it is something for the committee to decide), that there were factors other than a purely medical one that enter into the problem of the examination of aliens at ports of entry.

The CHAIRMAN. It is perfectly clear by a proper understanding of the doctor's statement what the remedy is, and it goes without saying that this committee could pass a law requiring 3,000 medical examiners, or 2,000 or 1,000, and if the other committee of Congress would appropriate for them they would be there.

Mr. RAKER. The chairman misunderstood me. I would like to have read the doctor's statement there. I want to be fair on the question.

(The reporter read Dr. Creel's statement as above recorded.)

Now let the doctor finish his answer.

Dr. CREEL. I would like to make it very plain in the record that nothing I have said was intended to imply that the medical examiners are concerned at all in what effect their medical examination will have on commerce. What I have sought to make plain was this, that in my own opinion there were factors other than the pure medical factor, and those are factors that this committee would have to decide on; the question of enlargement of the accommodations at Ellis Island; of appropriations necessary for increased personnel; also as to whether or not the procedure unreasonably interferes with commerce; that congestion of shipping at New York, if methods should be adopted which would cause material congestion of shipping.

Mr. RAKER. In other words, doctor, it is conceded that the medical examination there is not sufficient to test these diseases, and you have not sufficient inspectors and you have not sufficient room?

Dr. CREEL. Yes, sir.

Mr. RAKER. Now the question as to the enlargement of these things is a question for Congress to determine.

Dr. CREEL. Yes, sir.

Mr. RAKER. But so far as the medical examiners that are there, and so far as their time and ability will go, they should make an examination to determine all venereal diseases so that the parties should not be admitted. That is what you tried to say is it not?

Dr. CREEL. I did not understand the last part of your question.

Mr. RAKER. Will you read the question?

(Reporter read Mr. Raker's question as above recorded.)

Dr. CREEL. Medical examinations are more or less under the direction of the Commissioner General, and the work of the medical examiners must be coordinated with the other work, and the chief medical officer who has direction of the details, presumably direct them to make the examination so that so many aliens will be examined and passed through Ellis Island according as they arrive. In other words, he attempts to coordinate the medical examination with the other inspection of aliens, the literacy test, etc., and present congestion at Ellis Island.

Mr. RAKER. I am still bent on this proposition of whether or not they all enter or whether only a small percentage enter; if there are 10,000 that try to enter, whether or not the officers in charge, from the smallest to the highest, should not make such an examination, even if they only examined a thousand and performed that work on the thousand, if the other 9,000 were not examined because the Government does not furnish sufficient officers? That is what I am trying to impress in this record.

Dr. CREEL. Possibly I could make it plain by saying that it has been the policy of the Bureau of Public Health Service to instruct the medical examiners to conduct the examinations so that there will be a reasonable facilitation of the movement of immigration through Ellis Island.

Mr. WELTY. Could not those matters be avoided if the penalties against the owners of ships were enforced by requiring deportation, so that they would make an examination at the port of embarkation?

Dr. CREEL. There are penalties at present.

Mr. WELTY. Now, do you know, or will you furnish the committee, how many of those having venereal diseases and reported by your department have been deported by the bureau?

Dr. CREEL. According to a report from the chief medical officer at Ellis Island, in the past fiscal year out of 105 aliens certified to as being afflicted with tuberculosis or mental defects, imbecility, feeble-mindedness, only 62 were deported; of 266 certified to as afflicted with contagious diseases, 152 were deported; and of 6,309 certified to as presenting some physical condition affecting ability to earn a living, 151 were deported.

The CHAIRMAN. We get right back to your charge of failure to deport.

Mr. WELTY. Now, how many were deported there? How many were deported that had venereal disease?

Dr. CREEL. I haven't that data segregated; they were included with other contagious diseases.

Mr. Box. In which classification would they come?

Dr. CREEL. In the group of 266 certified to as being afflicted with contagious diseases.

Mr. Box. Over 2,000, though, weren't there?

Dr. CREEL. No; 266.

Mr. Box. I mean over 2,000 certified to.

Dr. CREEL. The group of 266 refers only to Ellis Island.

The CHAIRMAN. I must say that it is the general administrative practice in regard to cases certified to of venereal diseases that the

immigration authorities direct that they be sent to hospitals and they are treated and detained till cured. I don't believe they are deported.

Mr. WELTY. They are not deported?

Dr. CREEL. No, sir; not those that are detained till cured.

The CHAIRMAN. They are treated in hospitals at the expense of the ships that brought them?

Dr. CREEL. Yes, sir.

Mr. WELTY. Mr. Chairman, I would like to ask this one question, following up yours, why couldn't we go into that matter and find out why that phase of the law has not been lived up to? What is the use of sending a hundred inspectors there if it devolves upon our own Government to cure these men that have venereal disease, when we can place that burden upon the ship owners?

Mr. WILSON. They do that now. He said the ship had to pay for it.

Dr. CREEL. Yes, the shipowners pay for it.

The CHAIRMAN. I want to ask you, Doctor, to make a statement of the exact procedure, as nearly as you have it, of this examination made by our officers abroad. When was it inaugurated and how is it working?

Dr. CREEL. Under the act of February 15, 1893, the President is authorized to assign to American consulates abroad——

Mr. WELTY (interposing). What act was that?

Dr. CREEL. February 15, 1893. The President is authorized to assign to duty at American consulates in foreign countries medical officers who shall supervise the enforcement of United States quarantine regulations applicable to ships leaving for ports of the United States. Under that authority doctors have been assigned to consulates in Europe, mainly at Rotterdam, Paris, Messina, Goteburg, Havre, Cherbourg, and Dantzic. These are officers who supervise the provisions of the quarantine regulations; they have nothing to do with emigration. They are also stationed at Barcelona, Naples, Italy, and Pireus, Greece.

The CHAIRMAN. That has all been done recently?

Dr. CREEL. Within the last year. Dr. Blue is general supervisor in charge, and was assigned to duty at Paris, about last March.

The CHAIRMAN. Was there any of that going on before the war?

Dr. CREEL. At Naples we had a man attached to the American consulate.

The CHAIRMAN. Is that done by arrangement with other Governments?

Dr. CREEL. I don't quite understand what you mean by "arrangements with other Governments." These medical officers are not officially accredited by the foreign Government concerned; they are simply there as one of the consular force.

The CHAIRMAN. I did not know whether any Government at any time had objected.

Dr. CREEL. The Italians have recently objected to the practice.

Mr. WELTY. They make the examination of those persons intending to leave for America?

Dr. CREEL. Only in so far as quarantinable diseases are concerned.

The CHAIRMAN. Now I want to ask another question. Does Hoffman Island come under your jurisdiction?

Dr. CREEL. Hoffman Island is under New York State quarantine, but negotiations are now under way for the transfer of the quarantine station to Federal control, as soon as the title to the property is accepted by the Attorney General's Office. Congress has appropriated for the purpose.

The CHAIRMAN. Congress is about to buy it from the State of New York?

Dr. CREEL. Yes, sir.

The CHAIRMAN. Whose officers are at Hoffman Island now?

Dr. CREEL. New York State quarantine officers.

The CHAIRMAN. So when a ship's crew and passengers and all are deferred or detained at Hoffman Island for 10 days or 2 weeks on account of, probably, typhus, as recently happened, it is at the expense of New York State.

Dr. CREEL. I think it is at the expense of the steamship companies, supervised, of course, by the State officers. The steamship companies pay for it.

The CHAIRMAN. Now then, when, as recently happened along about Christmas time, the entire list of passengers on one of the big ships was sent to Hoffman Island because two cases of typhus, I believe, were aboard, who looked after the situation at Hoffman Island?

Dr. CREEL. The New York State quarantine officers.

The CHAIRMAN. Were any United States officials there at all?

Dr. CREEL. No, sir. I will say this, though, that Dr. Cofer, the quarantine officer, is an officer of the Public Health Service on leave; he receives no pay at all from the United States Government and is paid by the State of New York.

The CHAIRMAN. When vessels arrive, as that one did, with a case of typhus on board, are reports made to the United States Public Health Service.

Dr. CREEL. We get reports, yes, sir.

The CHAIRMAN. Have you had that report?

Dr. CREEL. I do not recall that individual report, but we do receive from the New York station reports of quarantinable diseases.

The CHAIRMAN. Have you any other reports recently, containing any of these quarantined diseases?

Dr. CREEL. They are automatically reported to the bureau from New York. We receive the statement that "a vessel has arrived with a case of typhus or smallpox," or whatever it may be.

Mr. RAKER. Doctor, under the three communicable diseases, gonorrhea, chancroid, and syphilis, there were about 3,749 in all. Then they reported for deportation 266 of the communicable diseases. Now just tell me how many were actually deported. You just read it a moment ago.

Dr. CREEL. The larger figure refers to all immigration into the United States.

Mr. RAKER. Yes.

Dr. CREEL. These deportation figures that I referred to applied only to New York.

Mr. Box. That is about 85 per cent of all the immigration.

Mr. RAKER. How many were those deported? I want that to go into the record here.

Dr. CREEL. Two hundred and sixty-six were certified to as being afflicted with contagious diseases.

Mr. RAKER. Now that meant all together?

Dr. CREEL. All contagious diseases, yes.

Mr. RAKER. How many were deported?

Dr. CREEL. One hundred and fifty-two.

Mr. RAKER. Then subtracting 152 from the 3,749—or it may be a much larger number in all the other ports.

The CHAIRMAN. It will be a still larger number by adding the other contagious and loathsome diseases.

Mr. RAKER. Which are not in there, and I am just wondering why all these cases that were detected are not deported.

Mr. BOX. He said they went to the hospitals for treatment at the expense of the steamship companies.

Dr. CREEL. Some are sent to hospitals for treatment; some of them are landed under bond.

Mr. RAKER. What I was leading up to was that all these venereal diseases are curable in a short time?

Dr. CREEL. I would not say that. Gonorrhea sometimes is quite intractable, especially subacute cases, which often require two or three months to cure.

Mr. RAKER. Well, would the answer be, then, that they are all curable?

Dr. CREEL. Undoubtedly. There is no question about it, if treatment were prolonged.

Mr. WHITE. I would like to ask a question, Mr. Chairman. I would like to ask the gentleman if the force were doubled, the force of medical examiners, or increased considerably, could the examinations be conducted with much more celerity and with more efficiency? I mean not to go to the extent of the laboratory tests and all that, you understand, and could the public health of this country be better protected if your force, we will say, was increased to 80 or 100 examiners, pursuing the same methods you now have?

Dr. CREEL. Under present conditions at Ellis Island I do not believe that an addition to the medical force would materially increase the efficiency, because of the lack of detention space and other facilities.

Mr. WHITE. That is what I wanted to know.

The CHAIRMAN. I think that this hearing thus far has disclosed the fact that these officers do the best they can. There are some laws that could be carried out in quite an extreme way, and even when the medical officers find these cases and hold them for deportation, the number of deportations is so small as to make all of the work amount to little except that they have held up certain particular cases. My experience was—we all saw a room up there full of clearly defective people, mental and physical defects—perfectly apparent—being held in temporary detention to give the relatives and friends an opportunity to make a plea.

Mr. WHITE. Well, Mr. Chairman, you believe that the examiners are sufficiently competent in all these cases to detect them and to provide for the remedies that are available?

The CHAIRMAN. No, I do not think so. It think that the work that the medical officers have to do, whether there is a limited num-

ber or a large number, is extreme. In reading this list of regulations here I notice here is paragraph 44 giving the names of diseases that can be detected by symptoms. There is half a page of names, and I am not medical man enough to pronounce many of them. Then again here is paragraph 39:

A preliminary line inspection should be conducted on an even, level surface, so that the passengers may not be tempted to look where they are stepping. Care should be taken to prevent crowding and to maintain a single file, evenly spaced, with the persons well separated.

Then paragraph 40 reads:

Whenever practicable, aliens should be required to appear at the medical inspection without baggage. The source of light should be so arranged as to secure even illumination of the approaching aliens and preferably from behind the examiner. Sunshine, direct or reflected from the water, in the faces of persons undergoing examination should be avoided.

The testimony given here is that these immigrants are caught with their baggage going upstairs.

Dr. CREEL. That at least was the procedure formerly in force.

The CHAIRMAN. So this suggestion or regulation that the inspection be conducted on an even, level surface without baggage was observed in the breach?

Dr. CREEL. After they get to the top of the stairs, Mr. Chairman, they then walk along a level floor. That is probably what was referred to. After the turn at top of steps is made, they approach the examiners, spaced at intervals, and are examined.

The CHAIRMAN. Still dragging their baggage, though?

Dr. CREEL. Yes, generally.

The CHAIRMAN. Now it amounts to this, that if the keen eye of the medical examiner is able to detect this or that decrepid person or a man afflicted from any disease from ringworm up, if the examiner sees it, he sets him aside, turns him into a room for a closer examination?

Dr. CREEL. Yes, sir.

The CHAIRMAN. Beyond that they file by?

Dr. CREEL. Yes, sir.

Mr. RAKER. Isn't the real object, as far as the examination goes now, to detect what they can from the eye, from observation, and to leave as many pass as can, so as to not interfere with the landing of immigrants?

The CHAIRMAN. No, I don't agree with you.

Mr. RAKER. That is just what I am trying to get into the record and to impress upon this committee, whether there is anything else for them to do whether they could do anything else. That is all they can do, but that ought not to prevent us from providing methods and means and remedies whereby it could be cured, Mr. Chairman. That is what I am after.

The CHAIRMAN. I agree with that.

Dr. CREEL. I hope that nothing will appear in the record to indicate anything I have said as implying that the medical officers are inefficient or indifferent to their obligations.

Mr. RAKER. No, there is no such intimation intended.

Dr. CREEL. What I have in mind is simply this: I have seen the time in 1903 when there was as high as 6,000, 7,000 and 8,000 immigrants came to Ellis Island in a day. It was known at the time

that the succeeding day and probably every day for a week there would be a continuous arrival of 4,000, or 5,000, or 6,000 immigrants, and it was necessary to rush those immigrants through in order to make room for the succeeding immigrants; otherwise it would simply mean the tying up of ships in the harbor.

The CHAIRMAN. It would mean a general breaking down of all the services intended to look over, feed, and take care of the landing of immigrants, to say nothing of the medical examination.

Dr. CREEL. It would simply be a damming up of the stream, and ultimately the harbor would be filled with ships unable to land the immigrants. I do not mean to imply that the medical officers at all would be responsible for such a condition, but they would be held responsible nevertheless. The Surgeon General would be held responsible.

Mr. BOX. In that case, Doctor, you simply cut the work to correspond to the demands made upon you, and though it is not satisfactory to you as a medical man, it does meet the requirements, and your situation is such that you have to meet the requirements?

Dr. CREEL. Exactly.

Mr. RAKER. I would like to ask this question: I hope the chairman will not feel in any way embarrassed by it, and that question is this: If there are 1,000 immigrants to be examined and it is all the inspectors can do in two days or three days to do it, and there are 10,000 in the harbor on the ships, isn't it better to let the 10,000 remain on the ships than to improperly inspect the 1,000? Now, that is hypothetical and general.

Mr. WELTY. Have you considered the suffering of the 10,000 on the ships?

Mr. RAKER. I have considered the suffering and I have considered the benefit to this country.

Mr. BOX. That is a question that this committee and Congress and the American people has got to decide. We get about what we are willing to pay for. That is what is the matter.

Mr. RAKER. Do you have any objection to answering my question?

The CHAIRMAN. He will give you a hypothetical answer. There is only one answer to it. We have been beating around to get that question over for the last hour, when there can be but one answer. We all agree about that.

Mr. CREEL. I say yes, sir.

The CHAIRMAN. Dr. Keir said the same thing, and if you get Gen. Cumming he will say the same thing, and if you get former Surg. Gen. Blue he will say the same thing.

Dr. CREEL. Here is an instance where we have certified, after considerable expenditure of effort, over 6,000 aliens suffering from organic conditions, and 120 of them were deported. Now that is not necessarily reflection on the Immigration Service, it simply means that we certify that they have conditions affecting their general ability to earn a living—then they pass before a board; here is a man that might have a leg off, which would obviously affect his ability to earn a living, but he says, "I am a silversmith." or a shoemaker, and the answer is, "That doesn't affect your ability to earn a living."

(Whereupon, at 4 o'clock p. m., the committee adjourned.)

TREASURY DEPARTMENT,
BUREAU OF THE PUBLIC HEALTH SERVICE,
Washington, January 22, 1921.

MY DEAR MR. JOHNSON: In reference to the recent hearing before your committee relative to representations of Dr. Broudman, I may say that I have more recently come across data bearing on the important point in which the various members of the committee were much interested, namely, the probable percentage of venereal infection amongst arriving aliens.

In the fiscal year 1915, largely because of the reduced immigration, opportunity presented for intensive examination of a considerable number of arriving aliens, whereby they were stripped of clothing and given a thorough examination in a private room. From time to time an entire ship load of immigrants were examined in this way, and in six months a total of 11,794 were thus inspected. Comparing this group of aliens subjected to intensive method of inspection, with corresponding number examined by the routine method of inspection, it was developed that there was practically no difference with respect to the detection of "dangerous contagious diseases," the percentage being respectively, 23 and 24. With respect to the loathsome contagious diseases in which are included venereal infection, the intensive method did prove to be materially more efficient, but it is interesting to note that of the 11,794 aliens intensively examined, there were only 37 certified for loathsome contagious diseases, or three-tenths of 1 per cent. This group of 37 cases included ringworm of the scalp and nails, favus, leprosy, yaws, etc., as well as venereal infection, and it is probable that the percentage of venereal infection was materially lower than three-tenths of 1 per cent. I am of the impression that I stated in the record that the probable venereal rate in aliens would not exceed 1 per cent. From this intensive study of 11,000 cases it would appear that it would not exceed one-fifth of 1 per cent.

Respectfully,

R. H. CREEL,
Assistant Surgeon General.

HON. ALBERT JOHNSON,
*Chairman Committee on Immigration and Naturalization,
United States House of Representatives, Washington, D. C.*